

ISSUE SLIP STAPLE AREA (for additional cross references)

PORTION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		10-22-01
O.I.P.E. CLASSIFIER	<i>MTN</i>	30	11-03-01
FORMALITY REVIEW	<i>2H</i>	1120	11-19-01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	1127	02-06-02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	02/12/01
2	02/12/01
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If more than 150 claims or 10 actions  
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PC 523 NL 11/20/01  
11/06/02

10/18/01